SUBMITTAL REQUIREMENTS FORM

CITY OF MILPITAS BUILDING INSPECTION DIVISION SUBMITTAL REQUIREMENTS FORM

(Additions and Remodels to Existing Residential Buildings)

Administering Department: Building Inspection Division 455 East Calaveras Boulevard, Milpitas CA 95035 tel: (408) 586-3000 • fax: 586-3286

NOTE: While this form is **not interactive** due to the requirement for an original signature, it may, however, be filled out, then printed and mailed or delivered to the City.

Use this form for Additions and Remodels to Existing Residential Buildings.	
Project Address:	Date:
In order to process and expedite your requfollowing:	est for a building permit, please submit the
Check appropriate box as applicable. If yo Inspection staff at (408) 942-2310).	ou have any questions, please call the Building

Architectural

Plot Plan

Roof Plan

Floor Plan

Elevations

Cross Sections

Sections, Details, Notes

Structural

General Notes and Standard Details

3 complete sets of drawings (minimum size 11" X 17") to include:

Foundation Plan

Roof Framing Plan

Floor Framing Plan

Sections and Details

Electrical, Mechanical and Plumbing

Plans to include:

Location of Electrical Services, Switches, Lights and Outlets

Location and Size of Electrical Subpanels

Location of Plumbing Fixtures

Mechanical Ventilation System

Documentation to Accompany Drawings

2 Sets of the Following Applicable:

Structural Design Calculations

T-24 Energy Calculations

If one or more required items are not submitted, the application will be considered incomplete and will not be processed.

I have read the above information and have submitted all the required information.

NOTE: Building permits may only be issued to a Homeowner or a Licensed Contractor.

If the Homeowner is going to <u>hire</u> laborers, it is required by State Law that the homeowner obtain Workman's Compensation insurance and provided a Certificate of Insurance for the City of Milpitas.

CERTIFICATION OF AUTHENTICITY

BEWARE, you are subject to prosecution if you unlawfully submit this form. UNDER PENALTY OF LAW, transmission of this form to the City of Milpitas is your certification that you are authorized to submit it and that the information presented is true and correct.

Name	Phone Number:	
Signature:	Date:	

I declare under penalty of perjury that the forgoing is true and correct, and that I will comply with all City Codes and Regulations in the conduct of my business.